

The Royal Australasian College of Physicians



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College of Physicians

House of Representatives - Standing Committee on Health and Ageing

Inquiry into Registration Processes and Support for Overseas Trained Doctors

From The Royal Australasian College of Physicians

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1. Introduction

The Royal Australasian College of Physicians (the College) welcomes the opportunity to provide a submission to the House of Representatives' Standing Committee on Health and Ageing *Inquiry into Registration Processes and Support for Overseas Trained Doctors*.

The College trains, educates and advocates on behalf of more than 13,500 physicians and 5,000 trainees – often referred to as medical specialists – across Australia and New Zealand. It represents more than 25 medical specialties including general paediatrics, cardiology, respiratory medicine, neurology, oncology and public health medicine, occupational and environmental medicine, palliative medicine, rehabilitation medicine, sexual health medicine and addiction medicine. Beyond the drive for medical excellence the College is committed to developing health and social policies which bring vital improvements to the wellbeing of patients.

All College training programs are accredited by the Australian Medical Council (AMC). The assessment of overseas trained doctors, referred to as the specialist assessment pathway, is an important role that the College undertakes in conjunction with the government. The College adheres to all government requirements, including those of the AMC and the Medical Board of Australia (MBA), in relation to the assessment of overseas trained doctors. Although the College plays a critical role in the education and professional development of medical specialists it does so in the context of an ecosystem that involves a number of interconnected agencies, such that its role cannot be considered in isolation.

The College understands and supports the community's expectation that the highest standards of safety and quality are maintained within the health system and expect that all doctors, regardless of where they are trained or come from, meet high professional quality standards.

The College values the substantial contribution made to the Australian medical workforce by overseas trained doctors and at all times seeks to work with doctors throughout the assessment process. Current Australian training and assessment processes produce world class physicians and the College also appreciates that other countries do as well.

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The pursuit of the highest standards in quality and safety and an appropriate diligence to the task of assessment, for both domestic and overseas trained doctors, is to ensure that the Australian community receive the best possible standard of health care. It is not the intention of the College that its education, training and assessment processes inappropriately restrain the rights of doctors to practice. It should be understood, however, that any process that promotes the highest standards of care will by definition be restrictive to those who do not meet those standards. The College continues to demonstrate that its processes are legal, equitable and transparent.

The Australian community expects no less, as at a minimum, people expect that doctors registered as specialists in Australia are properly trained and have appropriate experience.

The foundation of the specialist assessment pathway is that overseas trained doctors are assessed on their comparability to Australia's training and assessment standards as set by our national regulatory bodies the AMC and the MBA.

The College assesses an average 140 new overseas trained doctors in the specialist assessment pathway per annum. As at the end of January, 2011, 374 overseas trained doctors are at various stages of assessment.

The specialist assessment pathway must be aligned to our local training and assessment process to ensure comparability of exposure and fairness.

This means that overseas trained doctors are assessed to the same standards as those doctors trained in Australia. This provides a level playing field for assessment and a commonality of evaluation.

Recommendations to the regulatory authorities on the assessment of individual overseas trained doctors are made following thorough assessment of the doctor's training and experience. This process follows an agreed and publicly available policy. This includes a peer review process to establish the education and practice of the overseas trained doctor is comparable (either 'substantially comparable', 'partially comparable' or 'not-comparable') to our health system in their area of practice.

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The critical issue here is the use of the term *comparable*. The objective is to benchmark overseas trained doctors to Australian practitioners, which is appropriate and equitable.

The rigorous and independent process of assessment is important in maintaining the high standard of Australian medical services.

Once approved as substantially comparable or partially comparable, overseas trained doctors must be able to interact with all health care settings in Australia. Once approved and provided with the post-nominal they may move within the health care system as physicians or paediatricians and between cities and remote areas, and as such may apply to access the Medicare system either by working as a salaried specialist in a public hospital, or through fee-for-service in private practice

For example, an overseas trained doctor who trained in a major hospital in London must understand and learn the limitations of practicing in a geographically remote area of Australia with limited resources in a different health system. It is not just the clinical skills but the health network skills, understanding of our national health system and professional qualities which require assessment as well.

Equally, the College has a robust and transparent reconsideration, review and appeals process, which is open to all trainees and overseas trained doctors in the specialist assessment pathway.

This submission provides detail on the specialist assessment pathway and explains what *comparability to our training and assessment* means in practice and how comparability is determined.

The College is committed to continuous improvement, including in the assessment of overseas trained doctors and welcomes the opportunity to work with government, the AMC and MBA in identifying ways it can be improved and on implementing solutions. In the pursuit of continual improvement, this submission recommends some initial adjustments to existing processes to streamline the assessment experience for overseas trained doctors, while being careful to maintain the highest standards of safety and quality.

The media reaction to overseas trained doctors' assessment outcomes is often negative and ill informed. The debate is often skewed because the College continues

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to respect the privacy of individuals, and will not comment on specific cases even when others, including those who are a party to the process, may identify themselves. The College will not discuss specific cases without the express authority of the individual overseas trained doctor concerned to do so, and even then any comment will be limited. Other participants, including other overseas trained doctors, need to be assured that assessment will take place in a confidential manner.

In addressing areas of need and the high standards of care accepted by the community, the College values its responsibilities to assist and assess those seeking to practice in Australia. There is an understandable lack of public awareness about the specialist and area of need assessment process, which should be addressed as a matter of priority, as the community would expect this process to be coordinated and managed appropriately by government, in consultation with the specialist medical colleges relating to it.

Enhancements to this process could be facilitated through regular government led meetings between the AMC, MBA and specialist college operational staff to ensure AMC, government and jurisdictional guidelines in this area are being adhered to and that a process of continual improvement was adopted.

The transition from State Boards to a National Medical Board and the establishment of the Australian Health Practitioner Regulation Agency has created some transitional issues, namely those overseas trained doctors moving interstate, and the varying jurisdictional health authorities they are required to navigate through with each move. Overall, the College is supportive of the national reforms and the establishment of a single national body and medical board.

However, a number of complexities in the process still remain, with a number of bodies involved in the process (AMC, medical colleges, Medicare, Immigration, and Medical Board) – with input from several external organisations such as the Australian Medical Association (AMA), tertiary and non-tertiary hospitals, jurisdictions, employers and others. This presents some challenges not only for the overseas trained doctors but also for those entities involved in the process.

Overall the system continues to perform well and the College remains confident that the majority of overseas trained doctors in the majority of cases are managed in a timely and efficient manner.

2. Background

The College understands and supports the community's expectation that the highest standards of safety and quality are maintained within the health system and expect that all doctors, regardless of where they are trained or come from, meet high professional quality standards.

The Medical Board of Australia (MBA) is responsible for all matters relating to the registration of medical practitioners and for ensuring that doctors maintain professional standards expected by the public.

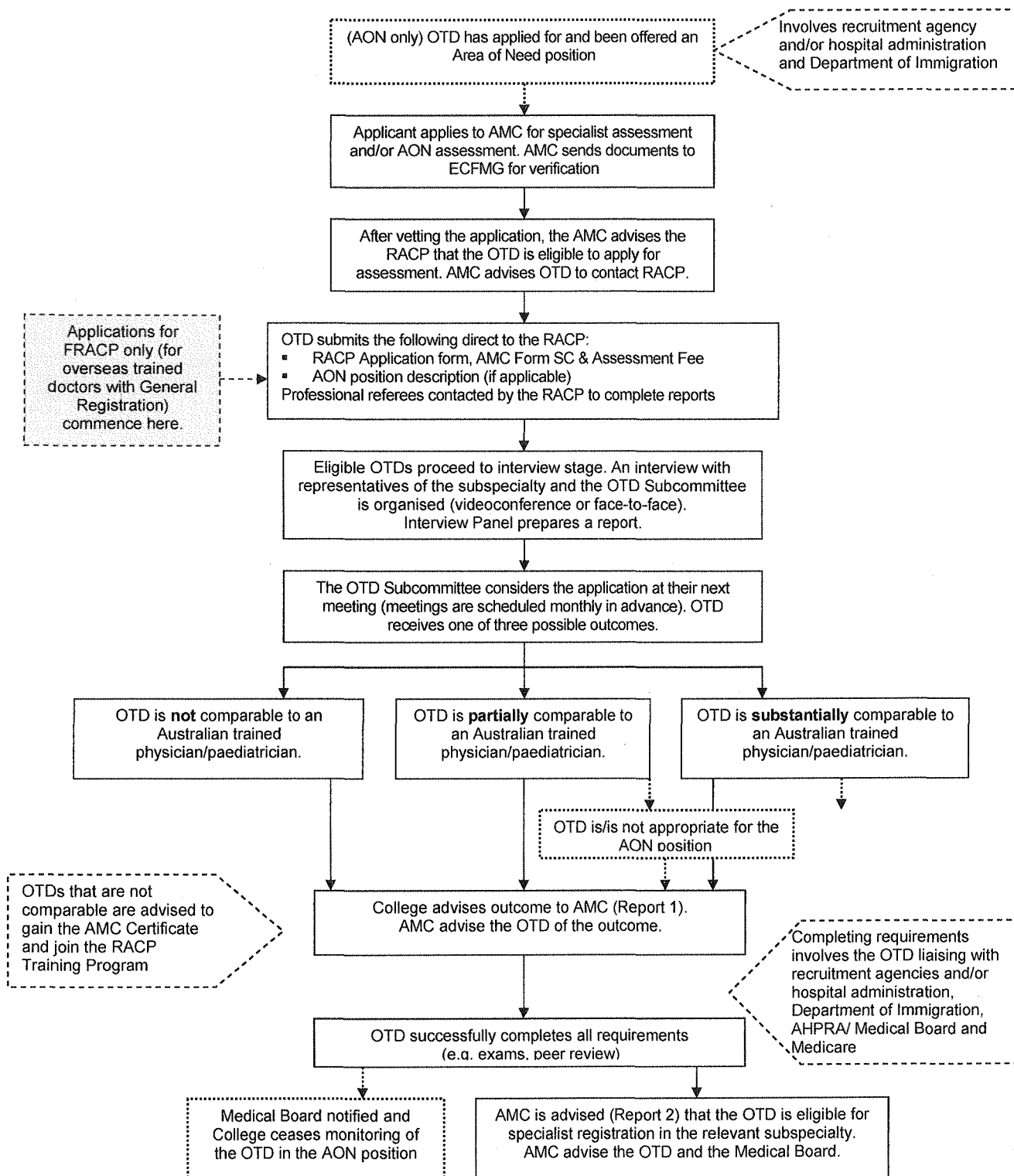
For overseas trained doctors, the MBA takes advice from the AMC and specialist medical colleges on the qualifications and comparability of individual overseas trained doctors.

The College policy and process accurately reflects the AMC guidelines on Specialist Assessment. Every step in the process involves considerable cross-checking of facts and references by either the College or the AMC.

The Diagram 'Specialist Assessment Pathway', figure 2.1 (see page 8), outlines the process for the specialist assessment pathway and identifies the multiple organisations with whom the overseas trained doctors interact. It is understandable that overseas trained doctors may become frustrated at times due to the complexity of the process and the number of organisations involved.

The process includes a formal written application with initial checks by the AMC and subsequent checks by the College, including referee checks; initial assessment; formal interview; and in-depth consideration by a committee of Fellows. As indicated above, the overseas trained doctor also has to interact separately with a number of stakeholders who may have similar lengthy processes in granting limited and full medical registration, Medicare numbers and rights to reside and work in Australia.

Figure 2.1: Specialist Assessment Pathway



3. Specialist Assessment Pathway

The assessment of overseas trained doctors, referred to as the specialist assessment pathway, is an extremely important role that the College undertakes on behalf of the Australian community.

The College strongly values our responsibilities in assessing overseas trained doctors seeking to practice in Australia. Patient safety is of primary importance to the College and the College remains cognisant of the extremely important role and substantial contribution overseas trained doctors play in augmenting the Australian medical workforce. Overseas trained doctors entering this pathway are already fully trained specialists in their own geographical jurisdictions.

Our role is to evaluate their training and experience to determine comparability to that undertaken by doctors training in Australia in the same discipline(s). A flow chart of the Australian specialist physician and paediatrician training pathway can be found in Appendix 1.

The College makes a substantial contribution to the Australian community in its assessment and support of overseas trained doctors. The College strives to balance the competing needs of the public who expect and deserve health professionals to provide them with an excellent standard of specialist health care, employers who need service gaps filled, and overseas trained doctors who expect and deserve a fair and transparent assessment process delivered as efficiently as possible.

Over the past three years, the College has assessed an average of 140 new applications from overseas trained doctors to enter the specialist assessment pathway per annum. In 2008, the College assessed 123 new applications from overseas trained doctors. In 2009 there were 188 new applications. In 2010, there were 109 overseas trained doctors entering the specialist assessment pathway.

As at the end of January 2011, 374 overseas trained doctors are at various stages of the specialist assessment pathway.

Figure 3.1: New overseas trained doctors, new applicants:

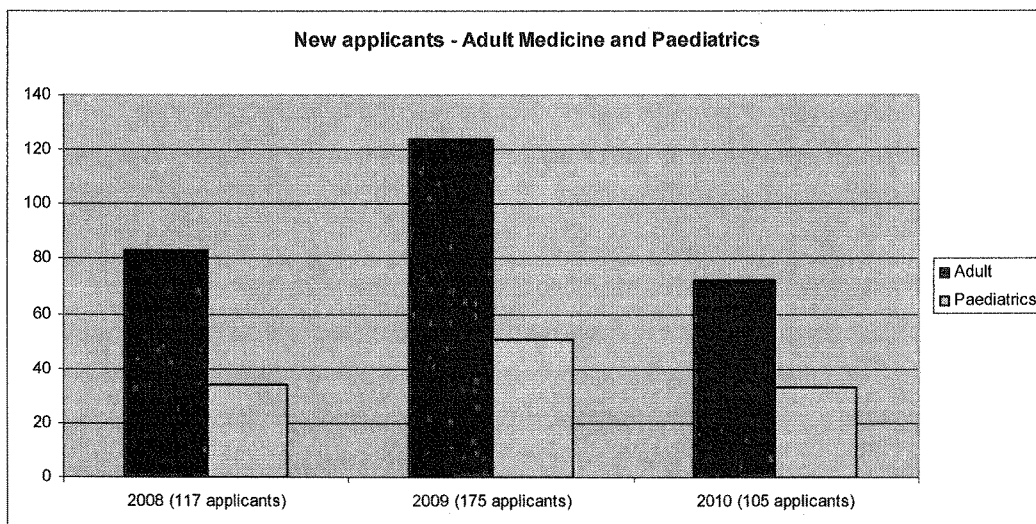
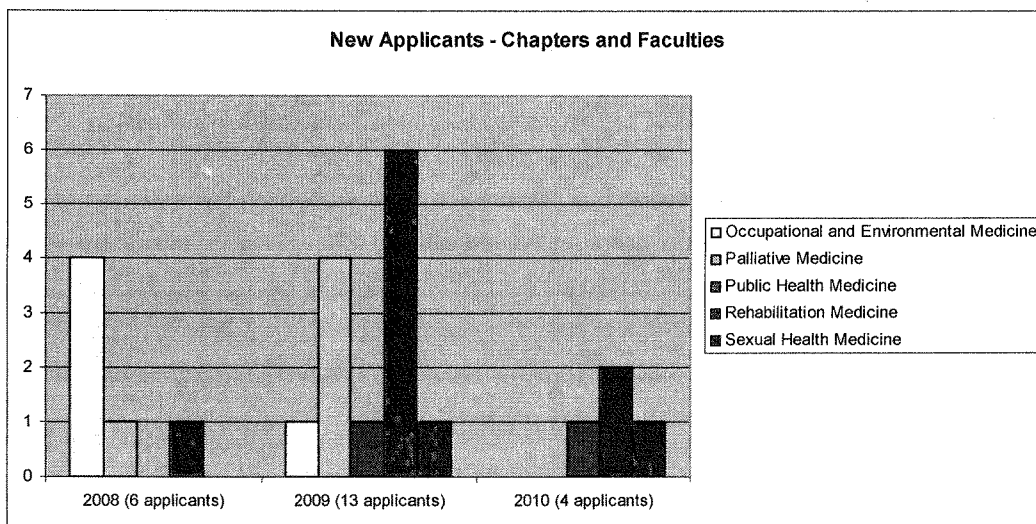


Figure 3.2: New overseas trained doctors, Chapters and Faculties:



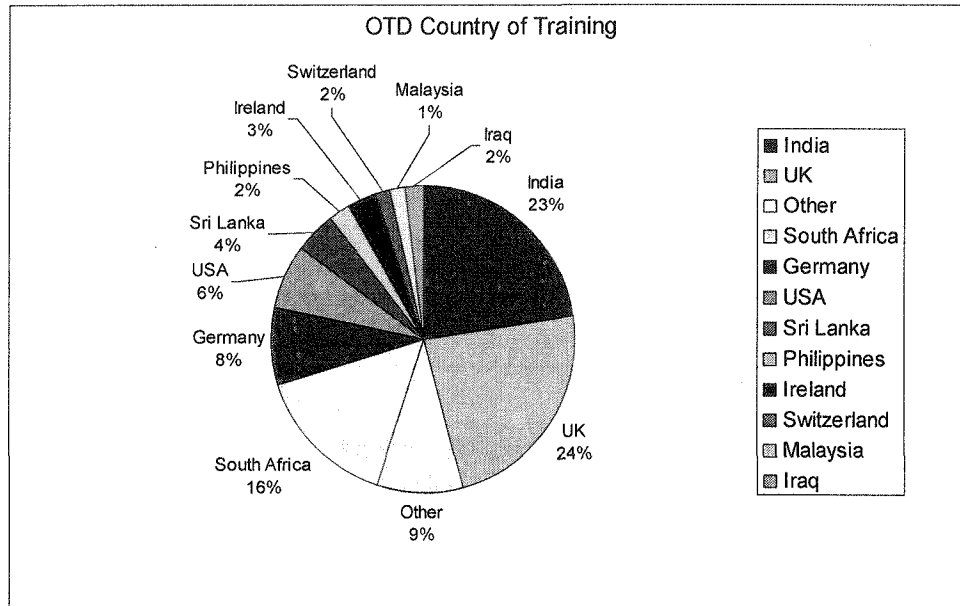
Country of training January 2008-Dec 2010:

The five most common countries of origin for overseas trained doctors in the College's specialist assessment pathway are:

- United Kingdom (24%)
- India (23%)
- South Africa (16%)
- Germany (8%)
- United States of America (6%)

The full breakdown of countries across all applicants is as follows (where 'Other' refers to countries with less than seven applicants):

Figure 3.3: Country of training



4. Evaluating comparability

The College adheres to all legal and regulatory responsibilities, including the AMC guidelines and the *Competition and Consumer Act 2010* (formerly the *Trade Practices Act 1974*), in relation to the assessment of international medical graduates and overseas trained doctors. This is reflected in our AMC accreditation report, dated 26 November 2010, where the College was commended for progress in improving our assessment of overseas trained doctors.

In extending the College's accreditation to December 2014, the AMC stated:

"Overall comment: Commendable progress – previous difficulties with the process have been addressed, and decisions are being made within recommended timeframes.

(Recommendation) 38 Report in annual reports to the AMC on:

- *The implementation of the [overseas trained doctors] assessment framework;*
- *Actions taken to address the current difficulties with the assessment process for overseas-trained physicians.*

Satisfactorily addressed. The College does not need to report on this recommendation again.

(Recommendation) 39 In assessing the applications of overseas-trained doctors, attribute more weight to assessment of current competence relative to previous training and assessment.

Satisfactorily addressed. The College does not need to report on this recommendation again."

Through the specialist assessment pathway, the College assesses the second largest number of overseas trained doctors after the Royal Australian College of General Practitioners (RACGP).

The College at all times seeks to work with doctors throughout the assessment process. The College has a committed unit of four staff specifically employed to assist and support overseas trained doctors as they negotiate the assessment process. The College is receptive to improving the process and make adjustments based on overseas trained doctors' feedback.

The various College committees, comprising senior experienced Fellows, meet regularly to assess candidates against established criteria and make decisions about comparability of an overseas trained doctor against the standard expected of a graduate specialist in their first year, after qualifying as a specialist in Australasia.

Establishing a Committee to undertake assessments

The College's Overseas Trained Physician Subcommittees (Adult Medicine and Paediatrics & Child Health) have been in operation since January 2008. Both committees have a good gender mix and include physicians and paediatricians who have themselves completed training overseas. The committees have a minimum of six members who adhere to the set by-laws and operating procedures of the College, including conflict of interest and privacy policies. They are provided with guidelines and relevant policies and are supported in all areas by an independent secretariat within the College's Education Deanery. Decisions reached within the committees must adhere to the relevant policy and precedent where appropriate. The two committees both meet monthly via teleconference and face-to-face twice a year. The three Faculties of the College have Lead Fellows regarding overseas trained doctors and each sit on the similarly constituted Faculty Education Committees.

An Expert Advisory Group (EAG) was also established to assist in the development and examination of the assessment policy, and review feedback and complaints received from overseas trained doctors. The EAG membership includes representatives from the overseas trained doctors subcommittees, College Chapters and Faculties, New Zealand and co-opted members of the community.

Careful documentation of assessment process

Record management is of paramount importance to the College, especially with regards to the assessment of overseas trained doctors. Each overseas trained doctor has their own hard copy file, kept in lockable cabinets, which include copies of all correspondence to, from and regarding the overseas trained doctors. Additionally, all correspondence and records are kept on a shared drive with access limited to appropriate staff. The College database is updated with assessment outcomes for overseas trained doctors and dates of movement within each part of the process. Outcomes are also triple checked to ensure accuracy.

Agendas and minutes of all overseas trained doctors Subcommittee and EAG meetings are held in hard and soft copy, as is general correspondence with the AMC and other stakeholders.

Evidence used for assessment

The specialist assessment pathway policy and process is publicly available on the College's website (<http://www.racp.edu.au/page/becoming-a-physician/overseas-trained-doctors-and-physicians/overseas-trained-physicians-australia>). The policy clearly details the required documentation for College staff and the Overseas Trained Doctors Subcommittee to consider when assessing an application. Committee members are asked to confirm that the appropriate documentation is before them and this is confirmed in meeting minutes. Overseas trained doctors and associated stakeholders are also provided with this information.

Regular contact between responsible staff at the College and the AMC ensures correct documentation is provided. An audit is completed on receipt of documentation and additional information is frequently requested at this early stage. The College checklist, which the AMC also has, assists.

In instances where the documentation is incomplete the overseas trained doctor and/or AMC are promptly informed usually via email, what documentation is outstanding. Once all required documentation is received and confirmed, the College commences the specialist assessment pathway process. This includes contacting the overseas trained doctor to make arrangements for an assessment interview.

Stage 1 – Assessment interview and recommendation

The College policy, which is available on our website (<http://www.racp.edu.au/page/becoming-a-physician/overseas-trained-doctors-and-physicians/overseas-trained-physicians-australia>), includes a framework for determining if the training and experience of an overseas trained doctor is comparable to that of an Australian trained physician or paediatrician. The policy details the assessment process and possible outcomes for overseas trained doctors.

The current policy has been in place since June 2009, and was developed over two years, involving in-depth research, evaluation and stakeholder engagement. The stakeholders who provided input into the policy included the AMC, the former state and territory Medical Boards, College Fellows, trainees, overseas trained doctors at various stages of their assessment and consumer representatives.

The policy is a living document which reflects the changing medical and medical education environments. It is reviewed every two years and updated at least every six months, in between formal reviews following wide consultation and communication.

Overseas trained doctors are normally interviewed ahead of the relevant Committee making a recommendation. In the rare occurrence an interview may not be required (usually only if the overseas trained doctor is identified as inappropriate for the specific specialised pathway), the Chair of the relevant subcommittee and/or the Chair of the Specialist Advisory/Training Committee in the relevant sub-speciality will be asked for comment before the College advises the AMC and the overseas trained doctor of a not-comparable outcome.

The interview normally consists of a representative of the Overseas Trained Doctors Subcommittee and a representative of the relevant Specialist Advisory/Training Committee. There is not always a member of the Overseas Trained Doctors Subcommittee available for the interview panel, mainly due to the high number of overseas trained doctors interviewed each year by the College (an average of 140 new overseas trained doctors).

Interviewers are experienced Fellows and are always approved by the subcommittee and Specialist Committee. All Interviewers have been offered training in conducting

overseas trained doctor interviews. The training highlights the importance of the interview being used to confirm training and experience and also as an opportunity for the overseas trained doctors to ask questions about the Australian medical environment and the overseas trained doctor assessment process.

Finding available relevant Fellows to interview overseas trained doctors is often difficult and can cause delays in reaching assessment outcomes. This can be a challenge to resolve as the College is reliant on these medical experts to provide their time in addition to their full time clinical roles and commitments.

Interviewers complete a standardised report card for each overseas trained doctor. The report card is provided at Appendix 4. Overseas trained doctors are also required to nominate five referees, from whom the College obtains referee reports from at least two referees, (referee report format is provided at Appendix 3). The criteria and the referee reports assist the College to make a recommendation whether the training and experience of an overseas trained doctor is 'substantially comparable', 'partially comparable', or 'not comparable' to that of an Australian-trained physician or paediatrician.

a) Substantial comparability

This means that the overseas trained doctor's training, assessments, professional qualities and clinical experience are of a similar standard to those of Australian medical professionals working in similar fields. Specifically for overseas trained doctors in the College's specialist assessment pathway, it includes:

- If he/she has undergone training in a system similar to that of Australia, including a period of general medical training (i.e. in Basic Training), followed by examination and an advanced training period in a sub-specialty.
- If that training has been overseen by a college similar to the RACP.
- If the duration of experience at specialist level is significant, with specialty practice in the area he/she is to be assessed in.
- If that experience is with a case load and clinical duties similar to that of an Australian/New Zealand specialist.
- If he/she meets AMC requirements for registration including proficiency in the English language.

All overseas trained doctors deemed 'substantially comparable' are required to successfully complete 12 months of peer review. In exceptional circumstances, reduction will be granted (where the overseas trained doctor is considered outstanding and/or has completed peer review previously in an Australian/New Zealand setting). Reduction will only be granted after the first satisfactory three month peer review report is received.

It should be noted that even in circumstances where the standard of training in the doctor's country of origin is similar to that in Australia, the scope of practice may be quite different. For example, in the US where highly specialised hospitals are commonplace, the scope of practice, and hence the experience, of a physician can be significantly different than in Australia.

b) Partial comparability

This means that the overseas trained doctor's training, assessments, professional qualities and clinical experience overseas have been assessed as having some equivalence to Australian trained physicians or paediatricians working in similar fields. Overseas trained doctors may be required to successfully complete the College written and/or clinical exams, up to 24 months peer review and/or a practice visit. Exam requirements must be completed before application for peer review is approved. The practice visit may take place at any time following the initial outcome. There may be additional stipulations set down by the relevant overseas trained doctors subcommittee or relevant Faculty Education Committee including focussing on a particular area of practice and/or specified 'top-up' training, to a maximum of 24 months assessment.

All substantially and partially comparable doctors are required to complete the overseas trained doctors' orientation module and enrol in a Continuing Professional Development (CPD) program. (Australian physicians are also required by the MBA to undertake CPD).

c) Not comparable

This means that the overseas trained doctor's training, assessments, professional qualities and clinical experience overseas is not equivalent to that of an Australian

trained physician or paediatrician. All overseas trained doctors in this instance are given clear feedback through the AMC (and outside the AMC if required) explaining why they were deemed not comparable. All overseas trained doctors are encouraged to apply for the College training program once they have gained the AMC Certificate, which goes toward providing them with full General Registration. Where appropriate, up to two years training outside of Australia can be accredited towards completion of the College training program.

It is important to again note that overseas trained doctors are being assessed for their comparability to the standard of the doctors in the health system in which they will be practicing. Whatever the standards or achievements of a doctor in another country, it is for practice within the Australian health system that they are being assessed and this is done in the absence of the completion of the Australian training pathways as a benchmark against the standard of care expected in the Australian setting.

Overseas trained doctors are assessed to the same standards as those doctors trained in Australia. This provides a level playing field for assessment and a commonality of evaluation.

It is of course recognised that some doctors may be assessed as not comparable. The assessment of not comparable does not, per se, diminish the overseas trained doctor's medical training undertaken overseas rather than the current practicing standard of the doctor is not comparable to the Australian standard.

This is in essence a peer review process, where overseas trained doctors are assessed against the standard of their peers and then reviewed by their peers to confirm and validate this assessment.

This is a fair and equitable process that maintains the standard of the quality of care promoted by Australian medical training and that expected by the community.

The College always uses the agreed protocol to communicate recommendations to the AMC.

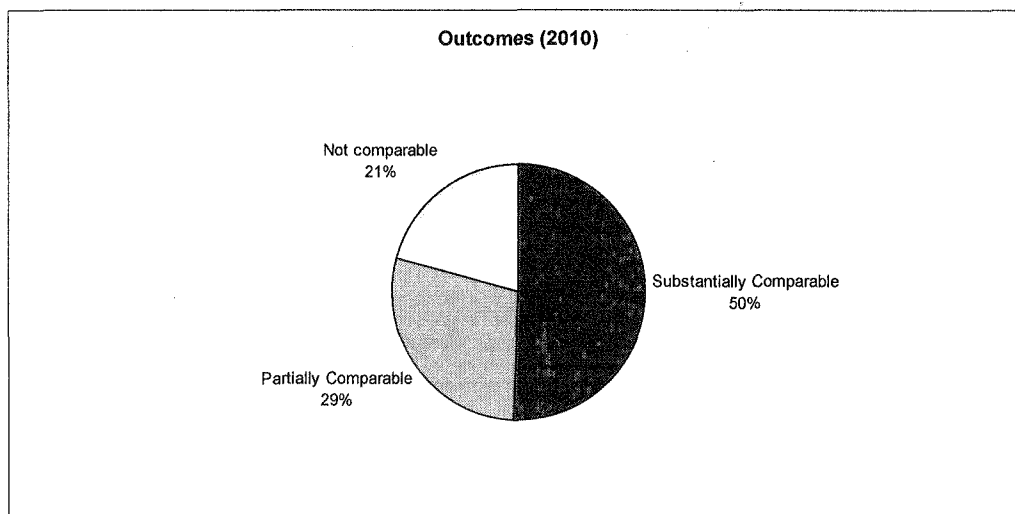
All specialist assessment pathway overseas trained doctors are concurrently assessed for Fellowship of the College. Once specialist registration is granted by the

AMC, overseas trained doctors can apply for Fellowship; this is usually just a formality if they have met all the requirements of the College in their specialist assessment.

Outcomes of assessment

Of all new applicants in 2010, 50% were substantially comparable, requiring only 12 months peer review. A further 29% were partially comparable with examination and/or longer peer review requirements (including top up training) and 21% were not comparable.

Figure 4.1: 2010 assessment outcomes

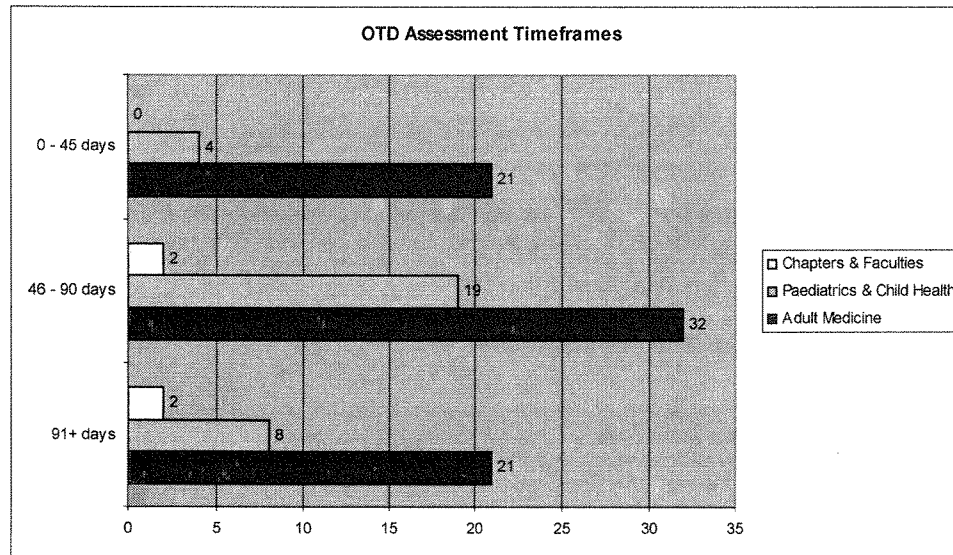


N.B. When an overseas trained doctor applies to be assessed in two medical subspecialties the outcome has been recorded separately for each subspecialty.

Positively in the last two years there has been a significant increase in the number of those considered partially comparable, and a decrease in the not comparable number.

Figure 4.2 overseas trained doctors assessment statistics

The below figure illustrates that the College assesses the majority of overseas trained doctors within the established timeframes.



0-90 days

The College has endeavored to ensure that all applications are processed as quickly and efficiently as possible. The statistics above indicate that despite a substantial workload, the College's dedicated unit is arranging the majority of interviews within the stipulated time frame. The unit is reliant on a number of factors including; availability College resources (e.g. videoconferencing facilities, meeting rooms etc.), availability of interviewing Fellows and, of course, the applicants.

91+ days

In some circumstances, the processing time for applications can be quite extensive. These situations are infrequent and have generally come about due to exceptional circumstances including the following:

- Applicant requested later interview date due to personal circumstances.
- Delay in the receipt of interview report or referee reports.

- The number of applicants has been too great to be assessed at a single subcommittee meeting (held monthly).
- Problems with interviews, e.g. cancellation or rescheduling.
- Additional information has been requested by the subcommittee prior to confirming an outcome.

In summary, 72% of all new overseas trained doctor applications in 2010 were assessed within the 90 day time limit. Applications exceeding 90 days usually involved extenuating circumstances out of the College's control.

The Joint Standing Committee on Overseas Trained Specialists (JSCOTS) Guidelines for Colleges indicates that "where practicable, Report 1 (initial assessment) should be made available to the AMC within three months of receipt by the College of the complete application for assessment".

Stage 2 – Further assessment, including 'Clinical Practice under Peer Review'

In a two-stage process of assessment, the specialist assessment pathway extends beyond the interview to include Clinical Practice under Peer Review, or, simply put, peer review in the field.

Overseas trained doctors who are considered substantially comparable will be required to successfully complete 12 months of peer review. For those considered partially comparable the period of peer review is longer at up to 24 months duration.

From January 2008 to December 2010, 419 of the 421 overseas trained doctors successfully completed their period of peer review. This very high completion rate validates the processes underpinning the specialist assessment pathway.

Peer review is completed in an equivalent way to that expected and experienced by local trainees. It is to determine whether overseas trained doctors are practising at a level comparable to an Australian trained specialist in their discipline(s).

Partially comparable candidates may also be required to successfully complete the College written and/or clinical exams or one of the Faculty assessments. These

exams are equivalent to the exams completed by locally produced trainees. Overseas trained doctors may also require a 'practice visit', which again may be a similar experience for locally produced trainees. A maximum period of 12 months 'Top up Training' may also be required if there is a lack of exposure in a particular area within the sub-speciality they are applying in.

The purpose of the period of peer review is two-fold. Firstly, it allows the overseas trained doctors the opportunity to be orientated to the Australian health care system and his/her workplace. It also allows practising specialists to interact with the overseas trained doctors in a clinical context to determine if he/she is performing at an appropriate level and to identify any areas of practice that might require improvement prior to fulfilling the requirements for specialist recognition.

All overseas trained doctors must have at least two (2) Peer Reviewers who are Fellows of the College or its Chapters and Faculties, monitoring their progress throughout the period of peer review. The overseas trained doctor nominates the Peer Reviewers once a position is found, however the College can provide assistance in the nomination of Peer Reviewers if necessary.

It is expected that the designated Peer Reviewers meet with the overseas trained doctors on a regular basis through both formal and informal mechanisms to discuss his/her progress and to implement remediation programs if the need arises.

The Peer Reviewers complete a *Peer Review Report* (see Appendix 4) at three, six and 12 month intervals.

Peer Reviewers are required to make specific comments on all areas relevant to an overseas trained doctor's practice. Before completing the report the Peer Reviewers should confer with other medical, nursing and allied health professional staff that the overseas trained doctor interacts with on a regular basis. During the period his/her performance will be assessed at the standard of a specialist and evaluation for each period will be discussed with the overseas trained doctor. In addition, the overseas trained doctor is required to sign the report and add any additional comments prior to it being returned to the College.

At the completion of the period, the relevant College representative will decide whether the period of peer review has been completed satisfactorily or if additional assessments are required.

Reconsideration, Review and Appeal

The reconsideration, review and appeals processes are available to all overseas trained doctors should they be dissatisfied with the outcome of the assessment provided in the specialist assessment pathway.

The College currently has a three stage appeal process, which includes reconsideration, review and appeal. The process is available on our website (<http://www.racp.edu.au/page/education-policies>), and overseas trained doctors are advised of the process when they receive the AMC Report outcomes. Overseas trained doctors have a right to be present at each step of the appeals process and to engage their own legal representation.

Reconsideration

Overseas trained doctors can request reconsideration by the overseas trained doctors subcommittee. This will be heard by the subcommittee within 30 days. There is currently no fee involved.

Review

Overseas trained doctors can request a review by the overseeing Divisional Education Committee (Adult Medicine or Paediatrics & Child Health) or Faculty Council. This will be heard by the committee within 60 days. There is currently no fee involved.

Appeal

Overseas trained doctors can request an Appeal to the College Board. This will be heard by an appeal committee, including the President-Elect, within 90 days. There is full cost recovery required to capture airfares and accommodation for Board representatives and legal costs. This is set at \$6,000.

Advice from the College's General Counsel is sought in all matters relating to review and appeal, which may be supplemented by external legal advice on a case-by-case basis.

The College is available to provide overseas trained doctors with impartial additional information and to guide them towards appropriate pathways or appeals. Overseas trained doctors, office holders and involved Fellows are advised not to contact chairs or members of the relevant committees directly. This further ensures a fair, just and unbiased appeal process.

5. Support for Overseas Trained Doctors

The College recognises the challenges facing overseas trained doctors in relocating to another country and the difficulties with having their credentials re-assessed after having previously trained and practiced as a fully qualified physician overseas.

The College at all times seek to be respectful and sensitive to the impact of this process on the individual. As advised earlier, the College makes adjustments to the specialist assessment pathway based on the feedback provided by overseas trained doctors.

The College website (www.racp.edu.au) has up-to-date and accessible information regarding our assessment processes, in written and diagram form. Contact details for queries or further information is clearly displayed. Overseas trained doctors are updated as their application progresses.

Although outcomes of the specialist assessment pathway are formally recommended to the AMC to communicate directly to the overseas trained doctor, overseas trained doctors are encouraged to contact the College for clarification or further information.

The College has developed and published several documents to assist overseas trained doctors and Peer Reviewers regarding the specialist assessment pathway and is constantly reviewing these and the methods used to communicate the key issues.

In addition, the College recently waived the requisite fee for using the College's CPD programs for the first 24 months of their assessment. Overseas trained doctors are required to enrol in this program (or equivalent) during peer review, as it assists with adjusting to the new Australian medical environment.

Another example of the approach taken by the College is the work done with funding supplied by the Commonwealth Department of Health and Aging to develop an orientation program for overseas trained doctors designed to familiarise overseas trained doctors with the Australian health care environment preparing them for practice in Australia. The program meets the AMC requirements for orientation within the first three months of starting work in Australia.

After overseas trained doctors have completed this program, they should have a general understanding of the Australian health care system and subjects relating to best practice health care in Australia. The program consists of seven modules with multiple topics. The modules have been developed so that they may be completed in any order, however the listed order is recommended as topics do have pre-requisite information.

There is no assessment associated with these modules, however overseas trained doctors are asked to complete these activities to satisfy the requirements of peer review and the AMC. Overseas trained doctors are asked to fill out an evaluation once all modules have been completed. The feedback received assists the College in ensuring the program can be updated to provide overseas trained doctors with pertinent information relating to working as physicians in Australia.

Figure 5.1 overseas trained doctors modules

Module	Duration
The Australian health care setting	4hrs
Cultural Competency	4hrs
The broader context of health	2.5hrs
Communication	5hrs
Quality and Safety	4.5hrs
Ethics	4.5hrs
Teaching and Learning	3hrs

The program has had positive feedback and addresses areas where our research shows overseas trained doctors need more assistance.

Furthermore, the Department of Health and Ageing has commissioned the College to administer the Specialist Training Program (STP). The STP provides support to enable medical specialist trainees to rotate through an expanded range of settings beyond traditional public teaching hospitals. From 1 January, 2011, the STP became the single platform for grants support for specialist training initiatives.

The aims and objectives of the STP are to:

- Increase the capacity of the health care sector to provide high quality, appropriate training opportunities to facilitate the required educational experiences for specialists in training.
- Supplement the available specialist workforce in outer metropolitan, rural and remote locations.
- Develop specialist training arrangements beyond traditional teaching hospitals.

In addition to establishing specialist training posts/positions, the program provides funds for a range of support activities, including:

- Developing support projects aimed at Specialist International Medical Graduates (SIMGs) to assist these doctors gain Fellowship in a timely and efficient manner and to help SIMGs reach the standards required of College Fellowship.

Progress to date and planned projects include:

Date	Activity	Milestones	Progress
Aug 2010	Review online Overseas Trained Physicians Mentoring, Supervision and Support Program (OTPMSSP) module and prepare development plan	Development plan ratified by OTP Senior Executive Officer and OTP committee.	Completed <ul style="list-style-type: none"> - Review work commenced in July - 8 modules from OTP Orientation module have been reviewed - completed in October
Sept 2010	Develop enhancements for the modules e.g.: reporting mechanism to assess data on OTPs.	OTMSSP Modules developed and approved by OTP committees and STP project team	Completed A contractor was commissioned for 8 days to undertake the necessary work to enhance the modules and reporting mechanism to enable data to be accessed
Oct 2010 – May 2011	Develop key modules on different aspects of the Professional Qualities Curricula.	Modules launched with 100% of OTPs registered	On track Scheduled to commence next month

Part of that funding will also enable us to further develop peer review workshops which have been designed to equip peer reviewers to support overseas trained doctors adequately, particularly those who are in rural areas. In 2011 the College is committed to at least one peer review workshop in each State and two in the larger States. STP funding will also assist us to develop a more formalised process in supporting overseas trained doctors in difficulty during their assessment. STP funding ensures that the College will be better able to involve overseas trained doctors in rural and remote areas.

6. Recommendations

- **Recommendation 1: That specialist assessment outcomes are publicly available to assist benchmarking performance across specialist pathways.**
- **Recommendation 2: That the Australian Government creates a centralised single Federal agency for a streamlined and integrated process for overseas trained doctors to access to gain all the information they need during the application process.**
- **Recommendation 3: That, in the interests of continuous improvement, regulators and other medical bodies work with the medical colleges to explore opportunities from other countries, especially New Zealand, to improve processes in Australia.**
- **Recommendation 4: That the Australian Government considers a public awareness campaign to promote greater understanding and compliance with the overseas trained doctors' assessment process and how overseas trained doctors can better integrate with the national healthcare system, particularly in rural and remote areas.**

The College welcomes the opportunity provided by this Inquiry to look at how the current system for the assessment of overseas trained doctors could be further improved.

Under the current arrangements, the College's recommendations to the regulatory authorities on the assessment of overseas trained doctors are made after a thorough assessment of an individual doctor's training and experience, following an agreed and publicly available policy. This includes a peer review process to establish the doctor is comparable to locally trained doctors in their area of practice and has gained adequate exposure to our health system before independent practice.

This thorough and independent process of assessment is important to maintaining the high standard of Australian medical services.

There are a number of issues that the College has identified to further improve the current system and the College has put forward some specific recommendations on how these could be addressed.

The College already has in place a robust and transparent reconsideration, review and appeals process which is open to all overseas trained doctors undergoing assessment. This is an area the College constantly reviews.

The College encourages overseas trained doctors to join existing trainee support systems particularly with regards to examination preparation. The College is reviewing the resources available prior to the exams to assist overseas trained doctors in preparation, particularly around cultural competency and communication and mentoring.

In addition, the College encourages overseas trained doctors to source mentors to assist them with their adjustment to Australia and their career progression. To enhance this, the College is researching the development of a peer support 'buddy system' which would enable overseas trained doctors to share their experiences with others undergoing assessment or those already completed, assisting overseas trained doctors to feel better supported during this time.

The College believe that there is potential here to create more opportunities to fund and manage projects which support the development of modules particularly around professional qualities which will be relevant for all medical practitioners regardless of their speciality. To be achieved this would require additional funding support from government.

There is an issue around wait time for those wanting to sit the AMC Clinical Exam. The wait time may be able to be reduced and the exam format reviewed to reduce the difficulties faced by overseas trained doctors wanting to join the College's training program and/or obtain general registration. The College will look at options to make improvements in this area but the involvement of the AMC may help facilitate this.

The College believes that clearer guidelines could be developed for those overseas trained doctors moving from Area of Need positions to specialist assessment positions or from one Area of Need position to another. There is a lack of clarity in

this arena. Greater clarity in the initial determination of Area of Need positions would also greatly assist and the College would be willing to work with the Medical Board and the various state and territory jurisdictions on ways to improve this process.

Not all overseas trained doctors are appropriate for specialist assessment/fellowship and this also needs to be recognised. Expectations do need to be managed and an exit pathway is needed if standards are not met.

The College has made significant improvements in our administration and assessment procedures in relation to overseas trained doctors in recent years. The College now works more closely with our stakeholders, continually improve governance processes, and constantly reflect on and review our policies and procedures in this area. The College supports continual improvement and wishes to work with our partners in improving this process for overseas trained doctors, their employers and the Australian public.

Further to the above opportunities, the College makes the following specific recommendations for consideration by government.

Recommendation 1: That specialist assessment outcomes are publicly available to assist benchmarking performance across specialist pathways.

There is no accurate statistical data available on all specialist assessment outcomes therefore the College has no way of knowing if our outcomes match other Colleges, with an appropriate number of substantially, partially and not comparable. The College strongly advocates for this information to be made publicly available to help assist us and the public.

Recommendation 2: That the Australian Government creates a centralised single Federal agency for a streamlined and integrated process for overseas trained doctors to access to gain all the information they need during the application process.

One of the most frequent complaints the College receives from overseas trained doctors regards the consistency and accuracy of the information they receive throughout the assessment process from a number of stakeholders. When an overseas trained doctors moves to Australia they are required to independently engage with the AMC, the MBA, Medicare, recruitment agents, their employer,

specialist colleges, college peer reviewers/supervisors, medical board peer reviewers/supervisors not to mention the various agencies they will need to interact with regarding setting up their home and family in a new country. This process would benefit from better coordination and clarity around the roles and responsibilities of the various parties and easier access to information. There is currently no 'one-stop shop' for all the information required by overseas trained doctors to help them navigate the system and comply with all the requirements.

Recommendation 3: That, in the interests of continuous improvement, regulators and other medical bodies work with the medical colleges to explore opportunities from other countries, especially New Zealand, to improve processes in Australia.

Given that so many of the specialist colleges are Australasian institutions, with many of our trainees and specialists moving between both countries and the increased globalisation of health, the College needs to align more closely with New Zealand. Currently there are similarities which can be expanded on.

Recommendation 4: That the Australian Government considers a public awareness campaign to promote greater understanding and compliance with the overseas trained doctors' assessment process and how overseas trained doctors can better integrate with the national healthcare system, particularly in rural and remote areas.

There is a real identified need for enhanced communication on the specialist assessment pathway for overseas trained doctors' assessment and the different role stakeholders play in it so that the public are better educated on this process, including its connection to patient safety, and the important role overseas trained doctors play in the Australian medical workforce. Proactive engagement with all levels of government is essential as part of this process.

7. Conclusion

The current system of assessment for overseas trained doctors must balance the need to support doctors seeking to practice in Australia and the continuing high standards of the Australian health care system.

These aims are for the most part mutually beneficial, with the vast majority of overseas trained doctors assessed by the Royal Australasian College of Physicians found to be either substantially comparable or partially comparable and those doctors go onto to make a fantastic contribution to servicing the health needs of the Australian community.

Indeed, the College values the substantial contribution made to the Australian medical workforce by overseas trained doctors and at all times seeks to work with doctors throughout the assessment process.

The assessment of overseas trained doctors is an important role that the College undertakes in conjunction with the government. The current system involves a number of medical colleges, regulatory bodies and government department at both the state and federal level. Most of the time these arrangements work well and the outcomes reported by the College in this submission support this.

However, with any system there will always be the exceptions to the rule and there will always be situations where the system has not worked to its optimum efficiency. The challenge for all parties involved and for others reviewing the system is to determine the difference between systemic failure and those unfortunate isolated cases that are often the result of case specific variables such as human error or unique circumstances.

The overall conclusion of this submission is that in the main the current arrangements involving the College support overseas trained doctors and provide a fair and equitable assessment in a timely and efficient manner.

To begin with the College's recommendations to regulatory authorities on the assessment of individual overseas trained doctors are made following thorough assessment of the comparability of the doctor's training and experience.

The foundation of the specialist assessment pathway is that overseas trained doctors are assessed on their comparability to Australia's training and assessment standards as set by our national regulatory bodies.

Assessing overseas trained doctors on their comparability to Australia's training and assessment standards, as set by our national regulatory bodies, means that overseas trained doctors are assessed to the same standards as those doctors trained and practicing in Australia. This provides a level playing field for assessment and an up to date evaluation of those doctors seeking to practice in Australia, regardless of when and where they received their qualifications.

A standard benchmarking process is required because the intention of the system is not to assess the institution, which some alternate models may recommend, but rather the comparable standard of the overseas trained doctor to their peers currently practicing in the Australian health care system.

Underpinning the premise of comparability is a set of key assumptions. The first key assumption is that the highest standards of safety and quality need to be maintained within the health system and that all doctors, regardless of where they are trained or come from, meet high professional quality standards. The risks of not maintaining standards are too great.

The second key assumption is fairness. It is fair for locally produced medical specialists and trainees that overseas trained doctors are assessed to the same standards against which their own training is benchmarked.

The third key assumption is recognition that other countries are capable of producing medical specialists that meet Australia's high standards and expectations. The statistics provided in this submission on the spread of countries of origin for overseas trained doctors in the College's specialist assessment pathway demonstrates this capability.

Regardless of country of origin, whether it is Australia or overseas, the community would expect that their medical specialists meet Australian standards, understand the intricacies of practicing in the Australian healthcare system and that the Australian regulatory authorities have undertaken the necessary checks before granting registration.

The College is proud of our contribution to the Australian community in the assessment and support of overseas trained doctors. The College strives to balance the competing needs of the public who expect and deserve health professionals to provide them with an excellent standard of specialist health care, employers who need service gaps filled, and overseas trained doctors who expect and deserve a fair and transparent assessment process delivered as efficiently as possible.

Under the current arrangements, the College's recommendations to the regulatory authorities on the assessment of overseas trained doctors are made after a thorough assessment of an individual doctor's training and experience, following an agreed and publicly available policy. This includes a peer review process to establish the doctor is comparable to locally trained doctors in their area of practice and has gained adequate exposure to our health system before independent practice. Equally, the College has a robust and transparent reconsideration, review and appeals process which is open to all trainees and overseas trained doctors in the specialist assessment pathway.

This thorough and independent process of assessment is important to maintaining the high standard of Australian medical services.

There are always areas for improvement and this inquiry has provided further opportunity for the College to explore ways to build on the advances that we have made in the assessment of overseas trained doctors, especially since 2008. The College is committed to continuous improvement and our submission outlined several key opportunities to improve the process and provide even greater support for overseas trained doctors. The College welcomes the opportunity to work with government, the AMC and MBA in identifying ways the assessment of overseas trained doctors can be improved and on implementing solutions.

The College has therefore taken the opportunity of this inquiry to try and further assist overseas trained doctors to practice in the Australian health care system with some specific recommendation for consideration by the Committee.

Overall, the system continues to perform well and the College remains confident that the majority of overseas trained doctors in the majority of instances are managed in a timely and efficient manner.